

**APPLICATION DATA SHEET****Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: A DATA ENCIPHERING METHOD AND  
ASSOCIATED CRYPTOGRAPHIC SYSTEM AND  
COMPONENT

Attorney Docket Number:: 032326-292

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: France

Status:: Full Capacity

Given Name:: Jean-Sebastien

Middle Name::

Family Name:: CORON

Name Suffix::

City of Residence:: Paris

State or Province of Residence::

Country of Residence:: France

Street of Mailing Address:: 4 rue Leon Delagrangre

City of Mailing Address:: Paris

State or Province of Mailing  
Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing  
Address:: F-75015

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Belgium
Status::	Full Capacity
Given Name::	Marc
Middle Name::	
Family Name::	JOYE
Name Suffix::	
City of Residence::	Saint Zacharie
State or Province of Residence::	
Country of Residence::	France
Street of Mailing Address::	19 rue Voltaire
City of Mailing Address::	Saint Zacharie
State or Province of Mailing Address::	
Country of Mailing Address::	France
Postal or Zip Code of Mailing Address::	F-83640
Applicant Authority Type::	Inventor
Primary Citizenship Country::	France
Status::	Full Capacity
Given Name::	David
Middle Name::	
Family Name::	NACCACHE
Name Suffix::	
City of Residence::	Paris

State or Province of Residence::

Country of Residence:: France

Street of Mailing Address:: 7 rue Chaptal

City of Mailing Address:: Paris

State or Province of Mailing Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing Address:: F-75009

Applicant Authority Type:: Inventor

Primary Citizenship Country:: France

Status:: Full Capacity

Given Name:: Pascal

Middle Name::

Family Name:: PAILLIER

Name Suffix::

City of Residence:: Paris

State or Province of Residence::

Country of Residence:: France

Street of Mailing Address:: 37 Cours de Vincennes

City of Mailing Address:: Paris

State or Province of Mailing Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing Address:: F-75020

## **Correspondence Information**

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

## **Representative Information**

Representative Customer Number:: 21839

## **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
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This Application	National Stage of	PCT/FR2003/002364	07/25/03
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## **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
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France	02/09475	07/26/02	Yes
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## **Assignee Information**

Assignee Name:: GEMPLUS

Street of Mailing Address:: Avenue du Pic de Bertagne, Parc d'activites de Gemenos

City of Mailing Address:: Gemenos

State or Province of Mailing Address::

Country of Mailing Address:: France

Postal or Zip Code of Mailing Address:: F-13420